CAMPAIG LOCAL COM							
Is This Report an Amendment: Yes							
Instructions for completing schedules are on the ba	ick of each schedule.						
COMMITTEE IDENTIFICATION							
Name of Committee	1.						
triends of John t. WEIShow Ir.				OFFICE USE ONLY			
2719 S. Cleveland TARK DRIVE				OFFICE USE ONLY			
City, State and Zip Code WEST Allis , WI. 53219							
Please check if address is different than previously reported, a	nd complete the Campaign Rep	gistration State	ment in the b	ack of this form.			
NAME OF REPORT							
January Continuing Pre-Primary July Continuing 2021 September Continuing Pre-Election		Fall [5	Special	Termination Report also complete Schedule 4			
SUMMARY OF RECEIPTS AND			-				
DISBURSEMENTS	Column A This Period	Colun Caler					
1. RECEIPTS		Year-To					
1A. Contributions (Including Loans) from Individuals	\$ - 0-	\$ -0 -					
1B. Contributions from Committees (Transfers-In)	s - o -	\$ - 0 -					
1C. Other Income and Commercial Loans	s - 0 -	s - 0	_				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) 2. DISBURSEMENTS	\$ - 0 -	18 - 0	· · · · · · · · · · · · · · · · · · ·				
2. DISDURSENIEN IS				\cap			
2A. Gross Expenditures	\$ - 0 -	\$ - 0					
2B. Contributions to Committees (Transfers-Out)	s - 0 -	5-0		ਰ			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	s - 0 -	\$-0					
CASH SUMMARY				ġ			
Cash Balance Beginning of Report	s 887.78			ECREOD/210712PM01:00			
Total Receipts	\$ 0.00			ក្រ ធ្វ			
Subtotal	\$ 887. 78			<u> </u>			
Total Disbursements	\$ 0.00			<u></u>			
CASH BALANCE END OF REPORT	\$ 887. 78						
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0.00						
LOANS (Balance at the Close of This Period-3B)	\$ 5,527.74	1					
I certify that I have examined this report and to the best o	-	is true, correc	t and comple	ete.			
Type or Print Name of Candidate or Treasurer	Signature of Canada die of Treasurer		Date: 7				
John F. WEISHAN JA. Email John F. Weishand anail. com Daytime Phone:							
Elitari Oddor Wel Mission Oddari (. Corq Daytine Phone:							

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0804, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page **2** of **2**

Complete Committee Name tohar F. WEIShAN In.

Instructions fo	r completing schedules are on the back of each								
	Full Name, Mailing Address and Zip Code of Loan Source John F. Weishow Jn. 27-19 S. Cleveland Park Drive WESTAIlis, WI. 53219		Outstanding		Cumulative	Outstanding			
			Obligations Beginning of This	New Loans This	Payments This Period	Obligations End of This Period			
			Period	Period	THIS I CHOO	Life of this relied			
Date 07/12/21			5,527.74	-0-	-0-	5,527.74			
List All Endorse	rs or Guarantors (if any)								
Full Name, Mai	ling Address and Zip Code	Occupation							
of Guarantor		Ососравон							
		Amount Guaranteed Outstanding							
		\$							
Full Name, Mailing Address and Zip Code of Guarantor		Occupation				***************************************			
		Amount Guaranteed Outstanding							
		\$							
	Full Name, Mailing Address and Zip Code of Loan So	urce	Outstanding		Cumulative	Outstanding			
	, ,		Obligations		Payments	Obligations			
			Beginning of This Period	New Loans This Period	This Period	End of This Period			
Date									
1 1									
List All Endorse	rs or Guarantors (if any)]					
Full Name, Mail	ing Address and Zip Code	Occupation							
of Guarantor									
		Amount Guaranteed Outstanding							
		\$							

Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation							
		Amount Guaranteed Outstanding							
		\$	_						
4 1	Full Name, Mailing Address and Zip Code of Loan Sor	urce	Outstanding		Cumulative	Outstanding			
٠.	,		Obligations		Payments	Obligations			
			Beginning of This Period	New Loans This Period	This Period	End of This Period			
Date									
1 1									
List All Endorse	rs or Guarantors (if any)		!	<u></u>		1			
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation							
		Amount Guaranteed Outstanding							
		<u> </u>							
		\$							
Full Name, Mailing Address and Zip Code of Guarantor		Occupation							
		Amount Guaranteed Outstanding							
		\$							